Dearness Home Committee of Management

To: **Chair and Members**
Dearness Home Committee of Management
From: **Leslie Hancock, Director of Long-Term Care**
Subject: **Director's Report to the Committee of Management for the Period November 16, 2024, to January 31, 2025**
Date: **February 25, 2025**

Recommendation

That on the recommendation of the Director, Long Term Care and with the concurrence of the Deputy City Manager, Social and Health Development, that this report related to Director's Report to the Committee of Management for the Period November 16, 2024, to January 31, 2025 **BE RECEIVED** for information.

Linkage to the Corporate Strategic Plan

The Dearness Home works toward the goal of Leading in Public Service by always seeking to improve services for the residents and their families.

The City of London is committed to working in partnership with the community to identify solutions that will drive a strong, deep and inclusive community recovery for London as we move out of and beyond the global COVID-19 pandemic.

Analysis

1.0 Background Information:

1.1 Previous Reports Related to this Matter:

- September 17, 2024, Director's Report, June 16, 2024 to August 15, 2024
- December 10, 2024, Director's Report, August 16, 2024 to November 15, 2024

2.0 Service Provision Statistics:

Occupancy Average November 1, 2024, to January 31, 2025	Number of Individuals on Waiting List as of January 31, 2025
98.88 %	Basic – 370 Private - 235

3.0 Ministry Inspections/Visits:

The Ministry of Long-Term Care visited the Dearness Home on January 27 to 30, 2025, to conduct a Critical Incident inspection related to allegations of improper care of a resident and infection prevention and control. The Home received two written notifications. The Ministry has not yet provided the Dearness Home with a copy of the Public Report.

A copy of the Public Report that was not available at the Dearness Home Committee of Management meeting on December 10, 2024, can be found under appendix A.

The Middlesex-London Health Unit visited the Dearness Home on December 11, 2024 to conduct a Compliance Inspection. There were no findings of non-compliance.

Public reports are posted by the MOLTC at the following link:
Link to MOHLTC Public Reports

Fire Inspections completed by the London Fire Department are current.

4.0 Mandatory and Critical Incident Reporting:

The Ministry of Long-Term Care (MOLTC) has a Mandatory and Critical Incident Reporting process which requires reporting of all critical incidents in the Home.

The following critical incidents were reported to the MOLTC during the reporting period:

Incident Type and Number (n) of Incidents	Issues	Status
Abuse or neglect of a resident that resulted in harm or risk of harm: Suspected Abuse: • Staff to Resident (1)	Followed City of London/ Dearness Home process for Resident Abuse Policy and Internal process. Organization to assess and provide interventions to mitigate further harm/risk.	Investigation completed and all appropriate actions taken with staff and residents involved. No abuse found to have occurred.
Incident that causes injury to a resident for which the resident is taken to hospital and which results in a significant change in the resident's health status: • Left hip fracture (1)	Fracture of resident's hip while at the Home required resident to be transported to hospital and a significant change in resident's health status.	Investigation completed and appropriate actions taken with staff and resident involved.
Disease Outbreak: • Covid (1)	A COVID-19 outbreak on Maple Place, 2 East, was declared on January 5, 2025 and resolved on January 27, 2025. There was minimal resident impact.	Daily surveillance and infection control measures are in place to minimize a chance of outbreak and/or duration of outbreak.

5.0 Infection Control:

- The Home continues to meet the standards of the Fixing Long-Term Care Act (FLTCA) and adheres to best practice guidelines for audits. Approximately 300 audits were completed during this reporting period.

- The IPAC team has collaborated closely with the ADOC team to create educational packages focused on nursing care and infection control, with the goal of supporting staff in ongoing learning and enhancing care for residents.
- Over the past quarter, the Home reviewed the remaining IPAC policies and procedures, working with frontline staff, adhering to best practice guidelines, IPAC standards, and FLTCA regulations, and incorporating insights from direct managers.
- The Home has completed the respiratory season vaccinations; however, we continue to offer flu, COVID-19, and RSV vaccinations to all new admissions.
- 52% of staff and 79% of residents have received the flu vaccine. 74% of residents have received the COVID-19 vaccine.
- Despite relaunching the staff flu vaccine campaign, our numbers remain lower than expected. The Home continues to communicate the importance of the flu vaccine through calls, emails, and in-person discussions. Staff have expressed concerns over the mandatory COVID-19 vaccination during the pandemic, as well as general fatigue with immunizations.
- During the Christmas period, there was a surge in respiratory viruses, including RSV, Influenza A, Parainfluenza, coronavirus, pneumonias, and COVID-19 in the Home. Due to the staff's knowledge and adherence to infection control practices, most of these viruses were resolved with no further spread within the Home.
- From August 25, 2024, to January 25, 2025, there have been 340 influenza cases, 6 outbreaks in the community, and 4 related deaths. Additionally, there have been 94 COVID-19 outbreaks resulting in 36 deaths, all within our community.
- The IPAC team continues to ensure 80% compliance with mask-fit testing.
- The IPAC and maintenance teams are working together to ensure that the construction of room 206 meets IPAC, FLTCA, and Ministry of Labour requirements. This project is scheduled for completion by January 31, 2025. In this the IPAC team due weekly audits in which the maintenance team receives.

6.0 Health and Safety:

Regular inspections were conducted during the reporting period. Safety procedures continue to be reviewed annually, and the Committee remains on schedule with its annual review. Members attended the Joint Health and Safety Committee Day Away November 29. The number of Supervisor's Report of Incidents were down during the reporting period.

7.0 General Updates:

7.1 Highlights in the Recreation Department:

- The Home’s Spiritual Care Committee provided a Christmas Eve Service in the Home on December 24. This was a meaningful time for many residents.
- In late November, our Chaplain hosted our quarterly time of memorial to honour those residents who had passed away. Family, close friends and residents all attended to light a candle in memorial and reflect on their friends and loved ones.
- Our Volunteer Coordinator attended the Joint Health and Safety Day Away education in November.
- The Spiritual Care Committee hosted an educational afternoon with a local funeral home exploring important conversations about death and dying for our residents and family.
- On December 25, our Giving Tree gifts were personally delivered to our residents. The Giving Tree hosts a number in an envelope that represents a resident who financially needs assistance or has no family supports. They

receive a meaningful specialized visit and a personalized gift on Christmas Day.

- The Manager of Community Life submitted the application for our 2025 Accreditation Survey with the Commission on Accreditation of Rehabilitation Facilities (CARF).
- The Home's Volunteer Coordinator recruited 12 new Volunteers to our growing program during this reporting period.
- Our Auxiliary hosted our 2nd Community Bazaar in November since the reopening of our new Friendship Centre with great fundraising success. In December, they sponsored their annual Plum Pudding event with a monetary gift that was generous and well received by each resident.
- Our Family Council voted in a new Chair due to the retirement of our current chair who served for over 3 years.
- The Recreation Team elevated the season with additional programs including Light Tours, Sound of Music at the Grand Theatre, The Messiah, Shopping, Cantata and Chinese New Year to name a few.
- The Manager of Community Life is one of 6 Gentle Persuasive Approach (GPA) Coaches at the Home. 3 GPA Classes were hosted over this reporting period educating over 35 staff members on the Gentle Persuasive Approach to Dementia Care.
- A Recreation Coordinator utilized her Horticulture Therapy certificate program to establish a partnership with the Upper Thames River Conservation Authority, facilitating the introduction of the Stream of Dreams (SofD) program to Dearness Home. We have conducted three meetings with our SofD Committee and are enthusiastic about progressing towards this event at Dearness in March. Invitations to the event will be extended to Civic Administration and all Members Council.
- A Recreation Coordinator has secured a partnership with St. Anthony's French Immersion School to start a Pen Pal Intergenerational program with Dearness. The program includes letter writing twice per month with a plan for an end of year/start of summer meet and greet with your Pen Pal partner.
- The Home has redesigned its Annual Satisfaction Survey that aligns with the Fixing Long-Term Care Act, 2021 capturing questions related directly to the Residents' Bill of Rights. There are now 2 surveys, one for Family and one for Residents. Both Resident and Family Councils have reviewed and approved the new format to be released by the end of January.

7.2 Highlights in the Dietary Department:

- Special Meals and treats were provided for residents on Christmas Eve, Christmas Day, Boxing Day and New Years.
- A visit from the Silver Group Purchasing Chef provided feedback and support to the cooks and the supervisors on best practices and products for the Home.
- Monthly Food Council meetings continue with residents on the third Thursday of every month.
- The Dietary department supplied refreshments for the Years of Service Awards Ceremony.
- New temporary Food/Environmental Service Supervisor was hired during the reporting period.
- Food was provided for the Auxiliary Bazaar as the Dearness Home donation to support our volunteers.

7.3 Highlights in the Nursing Department Include:

- The first of many in-person Mandatory Training sessions for 2025 was held on January 13. The in-person sessions cover the topics mandated under the Fixing Long-Term Care Act, as well as those required under our Long-Term Care Home Service Accountability Agreement (LSAA). As part of the new LSAA requirements, a section focused on Indigenous Cultural Awareness has been added to the training. Topics include Indigenous Diversity in Canada, European Contact, Residential Schools, Sixties Scoop, Intergenerational

Trauma, Colonialism and Indigenous Health, Trauma Informed Care, the Truth and Reconciliation Commission, and Culture Resurgence. Given the sensitivity of these topics, our Director of Care, who is of Anishinaabe heritage, presents this section truthfully, yet thoughtfully.

- In mid-November Dearness Home completed the Request for Proposal (RFP) process for a new Pharmacy provider. The successful proposal came from MediSystem Pharmacy. MediSystem is affiliated with Shopper's Drug Mart. The transition is to take place in mid-February.
- On January 22, Dearness Administration participated in a webinar held by the Ministry of Health related to their new compliance process. Under the new system Inspectors will be required to notify the Administrator of the reason for the visit when they arrive, follow a standard set of inspection protocols for consistency across the sector, complete inspections related to complaints or critical incidents separate from proactive inspections, as well as consider not issuing a noncompliance if an issue is deemed to be low risk and the inspector is satisfied the home has remedied the issue prior to the end of the inspection, amongst other things . In addition, the Ministry has created a new Investigations branch whose role is to evaluate evidence to determine if any one of 11 identified offences under the new Act have been committed with a view to prosecute.
- On November 18, our new full-time Nurse Practitioner (NP) joined the team. In addition to having spent the last few years as a NP member of a Nurse Lead Outreach Team (NLOT), she brings with her many years of experience in Long Term Care and acute hospital-based nursing. She also has a passion for preventive healthcare and a strong commitment to continuous quality improvement.
- On December 11 the Dearness Home held our annual Years of Service Ceremony. The ceremony is an opportunity for the Management team to thank and publicly recognize those staff who have reached a service milestone. The ceremony was held in our new auditorium and included a red carpet for recipients to walk down to receive their certificate. Light snacks and refreshments were also served to enhance the celebratory spirit. The service was well attended with a number of staff receiving awards for completing over 30 plus years of service at the Home.

7.4 Highlights in the Environmental Department Include:

- The Home had a successful annual fire inspection and evacuation during the reporting period.
- The Home had a successful annual electrical inspection during the reporting period.
- The Home completed its annual bed safety inspection.
- Home completed a home-wide equipment audit.

Submitted by: **Leslie Hancock, Director, Long Term Care**
Recommended by: **Leslie Hancock, Director, Long Term Care**
Concurred by: **Kevin Dickins, Deputy City Manager, Social and Health Development**

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